



Submission Instructions

ELECTRONIC SUBMISSIONS

Send manuscripts and any figures and tables in electronic form to:

Dr. Martin J. Murphy, Jr.
Executive Editor, *The Oncologist*
Submissions@TheOncologist.com
Telephone: 919-680-0011; Fax: 919-680-4411

Software

Microsoft® Word is preferred; however, we can accept most other word-processing programs. If not submitted in Microsoft Word, rich text format is preferred.

Format

Avoid complex format/style or automatic formatting features. Bold and italics are permitted.

Illustrations

Submission of electronic illustrations is preferred but not required. Submit line art, grayscale, and color figure illustrations on Iomega® zip disks or CD-ROM in *.eps or *.tif format. All scans, files, graphics, and output settings should be at 300 dpi for color images, 600 dpi for grayscale images, and 1,200 dpi for line art. Color proof is required. Laser or inkjet proofs (such as Iris) are acceptable but not recommended for color accuracy. Microsoft PowerPoint® figures are not acceptable for either the print or online version. Chromalin or Color keys are also acceptable but not recommended for color accuracy.

For information and resources to help you with the creation and submission of digital art, go to the Cadmus KnowledgeWorks digital art support website (<http://cjs.cadmus.com/da/index.asp>).

CD-ROM SUBMISSIONS

If a manuscript contains supplemental data too large for electronic transmission, submit a CD-ROM containing the complete manuscript and all tables and figures via postal mail to:

Dr. Martin J. Murphy, Jr.
Executive Director, *The Oncologist*
318 Blackwell St., Suite 260
Durham, North Carolina 27701
USA

Indicate on the disk the author's name, file name, and word-processing software used.

FORMAT OF MANUSCRIPTS

Submission cover letter

Submissions should be accompanied by a cover letter briefly describing the work's significance and identifying the Corresponding Author, with:

- complete mailing address
- telephone and fax numbers
- e-mail address
- website address (if available)

Title page

The first page of the manuscript should contain the following information:

- a running head of the title that is no more than 50 characters
- the title
- name(s) of author(s)
- name(s) of institution(s) in which the work was done
- correspondence information for Corresponding Author [name, address (including postal code), telephone and fax numbers, e-mail address, and website (if available)]
- disclaimers, if any
- a brief acknowledgment of grants, equipment, or drugs for research support
- four to six key words or phrases, using terms from the most recent Medical Subject Headings of Index Medicus (<http://www.nlm.nih.gov/tsd/serials/lji.html>)
- at least three learning objectives [see *The Oncologist* Continuing Medical Education (CME) Online section below]
- a description of current practice on the subject contrasted with best practice as described in the manuscript

Abstract

An abstract is required for all Original Articles and Review Articles. The abstract should:

- contain no more than 250 words
- clearly state the paper's primary objective
- if appropriate, describe materials and methods and results
- discuss the implications of the work
- summarize any conclusions
- be readable by nonspecialists as well as experts in the field
- define abbreviations and acronyms on first usage

The abstract should **not** contain:

- footnotes
- statistical significance values
- references
- proprietary names

Text

The text should be divided into the following sections (as appropriate):

- Introduction
- Materials and Methods
- Results
- Discussion
- Conclusion and/or Summary
- Acknowledgments
- References
- Tables
- Figures and figure legends

Within the text:

- Acronyms, abbreviations, and symbols must be clearly defined on first usage.
- Footnotes are not allowed, except within tables.
- References, tables, and figures must be numbered in the order in which they are cited in the text.

All submitted material should be double-spaced, leaving left and right margins of at least 2.5 cm. Do not justify the right-hand margin. Number each page consecutively. The CD-ROM accompanying the manuscript must contain exactly the same data as the hard copy.

Language

Papers are published in English (with American spellings). Authors who are not fluent in this language are advised to seek editorial help before submitting their papers.

Proprietary names

Proprietary names of drugs and devices are typically given once, followed (in parentheses) by the name and location of the manufacturer. Proprietary drug names will not be published in article titles; accepted manuscript titles will be modified to contain the generic drug name only.

Units of measurement

- Measurements of length, height, weight, and volume should be reported in metric units (meter, kilogram, or liter) or their decimal multiples.
- Temperatures should be given in degrees Celsius.
- Blood pressures should be given in millimeters of mercury.
- Abbreviations for units of measurement need not be defined (e.g., 5 cm, 20°C, 120 mmHg).
- All hematologic and clinical-chemistry measurements should be reported in metric in terms of the International System of Units (SI). Editors may request that alternative or non-SI units be added by the authors before publication.

Symbols and abbreviations

Define abbreviations and acronyms the first time used, both in the abstract and body of the article. Author-created abbreviations should be avoided, but if used, they must be clearly defined the first time they are used, both in the abstract and in the paper.

Footnotes

Footnotes should not be used except within tables.

References

References must be numbered consecutively, without periods after the reference numbers, and ordered as they appear in the text (i.e., citation by number). References must be double-spaced in a separate reference section that follows the body of the text. Manuscripts “in preparation” or “submitted” are not included in the reference list.

Reference format:

- List all authors when there are three or fewer.
- If more than three authors, list the first three followed by “et al.”
- List authors by last name first, followed by their initials (no periods).
- Abbreviations for titles of medical periodicals should conform to those in the latest edition of Index Medicus (<http://www.nlm.nih.gov/tsd/serials/lji.html>) and on MEDLINE (<http://medline.cos.com>).
- Use full beginning and ending page numbers (e.g., 10270–280 is not acceptable).

Examples of references may be found at http://theoncologist.alphamedpress.org/misc/TO_references.pdf.

Tables

Tables must be titled and cited in numerical order in the text using Arabic numbers. Each table should be double-spaced and typed on a separate page. Use superscript lowercase letters to denote footnotes within a table in the order in which they appear. Each table must include definitions of all abbreviations used. Abbreviations must be used more than once; if not, do not abbreviate but write out. Tables should be created in Microsoft® Word using the table feature. Failure to comply with these specifications may result in publication delay.

Figures

Figures must be titled and cited in numerical order in the text using Arabic numbers. We encourage the submission of illustrations in color. Submit illustrations in electronic format whenever possible. Figures should be labeled with the Corresponding Author name, the appropriate figure number, and orientation (e.g., “top”).

Panel labels (A, B, C...) on figures should be 12-point Helvetica bold capital letters, generally positioned at the top left of the panels, outside the image area.

For information and resources to help you with the creation and submission of digital art, go to the Cadmus KnowledgeWorks digital art support website (<http://cjs.cadmus.com/da/index.asp>).

Figure legends should be double-spaced on separate pages and should contain a brief title and explanation of the figures (maximum of 55 words for title and explanation). In addition, the magnification and stain used for photomicrographs should be stated, and any pertinent notes and definitions of all abbreviations used in the figure must be included.

Supplemental data

The submission of supplemental data that enhance the understanding of the science discussed in the manuscript is encouraged. Supplemental data should be submitted for peer review when the initial submission of the paper occurs. The Editors will review the supplemental data along with the manuscript. Critical information or figures required for the interpretation, understanding, and evaluation of the research must be included in the manuscript and **must not** be submitted as supplemental data. Supplemental data are published online only.

Videos

Videos for use on the Journal's website must be approved by AlphaMed Press. The preferred file format is compressed Windows Media® player-compatible (.wmp or .mpg). Video file size should be kept as small as possible while maintaining good resolution and screen size. Video files submitted to *The Oncologist* are published online only as Supplemental Data. Within the text of your manuscript, you may cite the videos as, for example, "supplemental online video 1."

Permission

Authors must obtain permission if required for reproduction or adaptation of figures or tables from copyrighted (previously published) material. Written permission must be obtained from the publisher of the journal or book concerned. (A form for your use is provided online at <http://theoncologist.alphamedpress.org/misc/ifora.shtml> under Other Related Documents.) The publication from which the figure or table is taken or adapted must be listed in the reference section. Within the legend of a reprinted or adapted table or figure should appear the following: "Reprinted [Adapted] with permission" along with the appropriate reference. All permission listings must be shown in the submitted manuscript; they cannot be entered on proofs.

FORMS REQUIRED FOR SUBMISSION

The Corresponding Author must complete and submit the following forms and return them to the Editorial Office at the time of submission:

- Manuscript Submission Cover Sheet
- Potential Conflict of Interest Disclosure Form
- Copyright Transfer Form
- Author Contribution Form
- Corresponding Author's Responsibilities and Agreement Form

Descriptions of these forms can be read in the Information for Authors.

Completed forms must be faxed to the Editorial Office at 919-680-4411 or emailed to Submissions@TheOncologist.com.

REQUIRED STATEMENTS PERTAINING TO ETHICAL GUIDELINES

Human subjects

For manuscripts reporting on studies involving human subjects, signed consent statements from persons, parents,

and/or legal guardians of minors who can be identified from the text or photographs must accompany the manuscript at the time of submission. If a pedigree or family tree is depicted, a statement must be included verifying that written informed consent was obtained from each living individual represented and that the authors have not modified the pedigree or family tree in any manner to avoid identification of the subjects.

Guidelines for stem cell research

Research with embryonic stem cells must include appropriate institutional review committee approval stated in the Materials and Methods section for human or animal subjects involved in experimental investigations. This statement should also show how informed consent was obtained for human subjects. Such manuscripts must include a statement verifying that the human investigations were preceded by local institutional review board approval and, if appropriate, in accordance with an assurance filed with and approved by the U.S. Department of Health and Human Services.

Animal welfare

Manuscripts reporting on studies that involve experiments with animals must include a statement verifying that care of animals was in accordance with institutional guidelines.

JOURNAL CONTENT

The following categories of submissions will be considered for inclusion in *The Oncologist*.

Original articles

Original articles describing new findings of major importance should contain no more than 4,000 words of text (excluding abstract, tables, figures, legends, and references), and are limited to a total of seven figures/tables. If additional figures/tables are needed, they will be treated as supplemental data (see Supplemental data section below).

Review articles

Although most review articles are solicited by the Editors, unsolicited reviews will also be considered. Review articles should contain no more than 4,000 words of text and no more than seven figures/tables.

Commentaries

Editorial commentaries are most often solicited by the Editors, but unsolicited commentaries will be considered for publication. Commentaries may appear in any section of the Journal, depending on the content of the article. The Commentary format may be used for ongoing dialogues, pro-and-con discussions of controversial issues, or subjective articles of interest in any field of oncology.

Letters and eLetters to the Editors

Letters should comment on work previously published in *The Oncologist* and should contain fewer than 500 words of text.

Art, poetry, personal reflections

The Reflections section is reserved for the thoughts, feelings, and deep concerns of caregivers, their cancer patients, and their loved ones. The editors encourage our readers to share their art, poetry, and personal reflections.

Announcements

Announcements of meetings and conferences that are of interest to the readership of *The Oncologist* should be received by the Editorial Office at least 3 months before the event. These are posted online only.

POST-SUBMISSION ISSUES

Proofs

Authors are sent page proofs, which are to be carefully proofread for any copyediting or typesetting errors. Authors should also make sure that any renumbered tables, figures, or references match text citations and that

figure legends correspond with text citations and actual figures. Proofs must be returned within 48 hours of receipt by express/overnight mail or fax.

Publication fee

Proffered manuscripts that are accepted for publication will be assessed a publication fee of \$1,500, which includes all page charges and any applicable color charges. The author agrees to pay this fee to the Publisher within 30 days of receiving the Publisher’s invoice. If an author is unable to support this publication fee, it is his or her responsibility to inform the Publisher at the time of manuscript submission. (Letters to the Editor and invited manuscripts are exempt from the publication fee.

THE ONCOLOGIST CONTINUING MEDICAL EDUCATION (CME) ONLINE

Continuing Medical Education (CME) credits are important to clinicians to maintain medical licensure and hospital privileges. Physicians are now able to obtain *AMA PRA Category 1 Credits™* through **The Oncologist CME Online**. The following types of manuscripts meet the overall objectives for CME selection:

- Articles that discuss new approaches to the diagnosis, prevention, and treatment of specific cancers
- Articles that review evolving topics in basic science that have clinical implications in cancer medicine
- Articles that are relevant to risk management, a specific area of emphasis required by some states for medical licensure

To help describe the educational need to be met by this activity, please include at least one of the following statements on the manuscript cover page:

1. Over the past year, this specialty has undergone changes that merit education.
2. Practitioners of this specialty need to be informed of breaking research that is medically relevant to the quality of patient care.
3. Traditional core performance areas in this specialty need reinforcing and updating through education.
4. Recent untoward patient incidents in this specialty concerning safety and efficacy merit a CME activity.

Gap Analysis

Articles selected for publication in **The Oncologist CME Online** program should focus on the “gap” between the physician’s current practice and best practice. Authors should explain how their articles will bridge that gap and describe the impact that their articles will have on learners’ competence or performance and/or how it might ultimately impact patients’ health. Please complete the following table and include it with your CME materials.

(1) Current Practice	(2) Best Practice	(3) The Resulting Gap

Patient Safety

In accordance with the national public interest, please indicate whether your activity has any patient safety concerns. If the activity does contain patient safety issues, those issues should be addressed in the activity. To facilitate this review, please include the following chart with your CME quiz submission:

Identified Patient Safety Issues	Planned Discussion in Activity Content

- There are no patient safety issues applicable to this activity.

Overall Objectives for CME Faculty

Learning Objectives

It is important that the learning objectives focus on how an activity will affect a physician's performance, describing what the learner will do differently in measurable outcomes requiring some analysis, synthesis, or application to practice. The learning objectives should focus primarily on what participants will do/learn/validate as a result of completing the activity. Submitting authors whose articles are chosen to provide CME credits must:

- Provide a minimum of three learning objectives (if not already submitted) that readers should expect to accomplish once they have successfully completed the specific CME activity.
- Highlight one of the learning objectives as the focus for the activity. This one learning objective will be used as the basis for potential outcome related surveys of the activity.

For example:

After completing this activity, the reader should be able to:

1. Describe the urogenital consequences of anti-estrogen treatment among women with a prior diagnosis of breast cancer and the effects that these side effects have on quality of life and medication compliance. ****Focus****
2. Evaluate the standard treatment of urogenital atrophy, including alternatives to topical estrogen replacement, in the non-breast cancer and breast cancer populations.
3. Based on the current recommendations of estrogen replacement therapy among women with a prior diagnosis of breast cancer, select the appropriate treatment strategies for your patients.

Practice Strategies

The ultimate goal of continuing medical education is to make positive changes in the practice of medicine. Learners should be able to translate their newly-acquired knowledge into practical applications for their medical practices. Submitting authors whose articles are chosen to provide CME credits must:

- Provide two strategies learners should be able to implement in their practices as a result of completing this CME activity.

Quiz Questions

Quiz questions need to emphasize the central message of the CME activity. Questions should be straightforward, and their associated "hints" should reflect the preferred answer. The purpose is to provide a meaningful learning experience rather than tricky questions. Submitting authors whose articles are chosen to provide CME credits will be asked to:

- Provide a minimum of five and a maximum of eight multiple-choice questions for a given CME quiz. The questions should have only **one** correct answer.

For Example:

Which of the following prognostic factors is the best predictor of outcome for patients with locally advanced breast cancer?

- a. p53 status.
- b. Nuclear grade.
- c. Her-2-neu status.
- d. Number of lymph nodes involved.


The correct answer is: d

- Provide the preferred answer for each multiple-choice question. (See example above)
- For each quiz question, specify an area of text (no more than one or two consecutive paragraphs) or a figure or table where the preferred answer resides within the article. When referencing the area of text

from the manuscript version of the article, please indicate section, page number, and paragraph or figure/table number.

For Example:

The preferred answer resides in the following paragraph(s): Manuscript: section “Treating Cancer,” page 5, paragraph 2 through paragraph 4.

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